



155 Federal Street, 7th Floor
Boston, MA 02110
(800) 462-9897

EXHIBIT

48

2/18/02

PREMIUM NOTICE

DISABILITY INCOME POLICY

POLICY NUMBER
0641734

AMOUNT AND MODE OF PAYMENT
\$ 3,529.14 PRO RATA 13 MONTHS DUE DATE
3/01/02

PROVIDENT BANK
C/O ROBERT EDWARDS
1055 ST. PAUL PL
CINCINNATI OH 45202

NOTE: THE WAIVER OF PREMIUM PROVIDED BY YOUR POLICY
TERMINATED ON 2/25/02. THIS NOTICE COVERS THE
PREMIUM NOW DUE ON YOUR POLICY FROM 3/01/02 TO
4/01/03.

AGENCY
MCB03

*PLEASE INDICATE CHANGES OR CORRECTIONS ON RETURN PORTION OF NOTICE BELOW
NOTICE PRINTED 3/28/02 RE: ERIC L. JEFFRIES
PROMPT PAYMENT PROTECTS YOUR FINANCIAL SECURITY

PLEASE RETURN THIS PORTION OF PREMIUM NOTICE WITH YOUR PAYMENT

YOUR POLICY WILL LAPSE IF THE PREMIUM IS NOT PAID WITHIN 31 DAYS OF THE DUE DATE.

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4/01/03.

*Changes
Name: _____
Address: _____
City: _____
State: _____ Zip: _____

AGENCY

MCB03 RE: ERIC L. JEFFRIES
Signature: _____ FILE COPY

NOTICE PRINTED 3/28/02